

P941000076411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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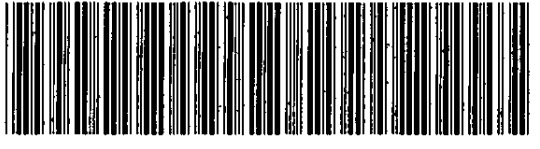
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Change  
Sf

7-20-08

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: GENESIS MOVING AND STORAGE, INC  
(Name of Corporation)

DOCUMENT NUMBER: P94000076411

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

WYNAND WIESE

(Name of Contact Person)

GENESIS MOVING AND STORAGE INC

(Firm/Company)

1688 NORTHEAST 205 TERRACE

(Address)

NORTH MIAMI, FLORIDA 33179

(City/State and Zip Code)

For further information concerning this matter, please call:

WYNAND WIESE

(Name of Contact Person)

at ( 305 ) 652-3200

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GENESIS MOVING AND STORAGE, INC
2. The principal office address: 1688 NORTHEAST 205 TERRACE  
NORTH MIAMI, FLORIDA 33179
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/18/94 Document number: P94000076411
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

WYNAND WIESE  
20855 N.E. 16TH AVENUE C-3  
NORTH MIAMI BEACH, FLORIDA 33179

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

WYNAND WIESE  
1688 NORTHEAST 205 TERRACE  
(P.O. Box NOT acceptable)  
NORTH MIAMI, FLORIDA 33179

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

WYNAND WIESE, PRESIDENT  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
(Signature of Registered Agent)

6/25/08  
(Date)

If signing on behalf of an entity:

WYNAND WIESE  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*